

Application to Inter in a Thames-Coromandel District Cemetery



Details of Deceased

Surname		Given Names	
Age	Date of Death	Date of Birth	
Occupation		Religion	
Where Born		Where Died	
Residential address at time of death			
Gender <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		Ethnicity	
Did they reside within the Thames-Coromandel District area for at least a 12 month period prior to date of death		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Or did they reside in the Thames-Coromandel District area for a continuous period of at least 10 years in their life time		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Returned Servicemens Regiment Number		RSA Plot Eligibility Confirmed <input type="checkbox"/> YES <input type="checkbox"/> NO	

Applicant Details

Company Name <i>(if applicable)</i>	
Surname	Given Names
Address/ City/Town	
Relationship to Deceased	
Telephone Number <i>(include area code)</i>	E-mail Address
Permission that Next of Kin details may be published <input type="checkbox"/> YES <input type="checkbox"/> NO	

Next of Kin *(if different to applicant)*

Surname	Given Names
Address/ City/Town	
Relationship to Deceased	
Telephone Number <i>(include area code)</i>	E-mail Address

As the applicant, and as the person signing the form, I accept responsibility for the accuracy of the information provided and accept liability for payment of all fees charged by Thames-Coromandel District Council relating to this application. I also agree that I may be required to pay or reimburse all costs incurred to recover any amount overdue for payment.

I/we authorise any person or company to provide Council with such information as Council may require in response to your credit enquiries. I/we further authorise Council to furnish to any third party details of this application and any subsequent dealings that I/we may have with you as a result of this application being actioned by Council.

I also further agree that Section 18 of the Cemeteries Bylaw 2015 - Erection and Maintenance of Monuments - shall be complied with.

Signature

Name (please print)

Date (DD/MM/YYYY)

Time

Burial Details

Casket Ashes

Burial at (please tick ✓)

Totara Memorial Park Cemetery, Thames

Omahu Cemetery

Whangamata Cemetery

Tairua Cemetery

Mercury Bay Cemetery

Buffalo Cemetery Coromandel

Colville Cemetery

Size of Casket/Ashes Container

_____ mm x _____ mm x _____
(length) (breadth/width) (depth/height)

Oversize
Casket?

Any other details of the Casket/Ashes Container that differs from standard construction

Company
Name

Date of
Burial

Day of
Burial

Service
Commences

am / pm

Service
At

Arrival at
Cemetery

am / pm

Will the funeral director be onsite for burial

YES

NO

Family to backfill

YES

NO

**To refill grave with soil once interment has taken place.*

Casket Burials

Do you require Council to set up casket lowering Straps and Bearers

YES

NO

Do you require assistance from the sexton

YES

NO

If yes, please specify

Name of Deceased

Plot Details *(Choose one of the options below)*

New Plot

Application to purchase a cemetery plot attached 

Reserved Plot

Section

Block

Plot

Plot Certificate Number

Re-open Plot

Section

Block

Plot

Plot Certificate Number

Person(s) previously interred

Date of first Interment

Relationship to those previously interred

Is there an existing headstone YES NO

Concrete reopen required YES NO

Declaration *(to be filled in where Reserved Plot or Plot Re-Open is selected)*

I, the applicant, am authorised to give my permission for the deceased person to be interred in this plot, or for the above plot to be re-opened for the interment of the deceased person whose name is given on this form.

Signature

Name (please print)

Date (DD/MM/YYYY)

Office use only

PLOT PURCHASE

\$

BURIAL FEE

\$

OTHER

\$

FEES WAIVED

\$

TOTAL

\$

WARRANT NUMBER

RECEIPT NUMBER

PLOT CERTIFICATE NUMBER

IF OTHER, PLEASE SPECIFY

PLOT DETAILS: CEMETERY

SECTION

BLOCK

PLOT

CEMETERY MODULE UPDATED

YES

CONTRACTOR NOTIFIED

YES

DATE STAMP

CSR WHO HANDLED INTERMENT

DATE